		4	. =
DISTRIBUTION			
SANTA FE		1	
F LE		1/	
L.S.G.S.		1	
LAND OFFICE			
TRANSPORTER	OIL		
	645	1/	

/

SANTA FE	1	CONSERVATION COMMISSION Form C-104			
F LE /	REQUEST	FOR ALLOWABLE Supersedes Old C-104 and C-1 Effective 1-1-65			
U.S.G.S.	AUTHORIZATION TO TO	AND			
LAND OFFICE	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	L GAS		
OIL	<del> </del>				
TRANSPORTER GAS /					
OPERATOR /					
PRORATION OFFICE					
Operator					
AMOCO PRODUCTION COM	PANY				
Address					
Feason(s) for filing (Check proper)		Other (Please explain)			
New Weli	Change in Transporter of:	Omer (1 tease explain)			
Recompletion	Oil Dry Go	as [			
Change in Ownership	Casinghead Gas Conde	<del></del>			
If change of ownership give name and address of previous owner	e				
and address of previous owner _					
I. DESCRIPTION OF WELL AN					
Lease Name	Well No. Pool Name, Including F		1		
Jicarilla Apache 102	26 Tapacito Pictu	red Cliffs State, Fed	leral or Fee Indian 102		
Location					
Unit Letter <b>F</b> ; 1	490 Feet From The North Lin	ne and <u>1835</u> Feet Fro	om The West		
			A *1		
Line of Section 10	Township 26-N Range	4-W , NMPM, Rio	Arriba County		
T. DECKONATION OF TO ANGRE	DEED OF OU AND NATIONAL CA	16			
Name of Authorized Transporter of	ORTER OF OIL AND NATURAL GA		proved copy of this form is to be sent)		
, came of realistics					
Name of Authorized Transporter of	Casinghead Gas or Dry Gas X	Address (Give address to which ap	proved copy of this form is to be sent)		
Gas Company of New M		P.O. Box 1899 Bloomfi	Leld, New Mexico 87413		
If well produces oil or liquids,	Unit Sec. Twp. Rge.		When		
give location of tanks.		No	Approx. 60 days		
If this production is commingled	with that from any other lease or pool,				
V. COMPLETION DATA					
Designate Type of Comple	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Restv. Diff. Restv.		
Designate Type of Compre	X	X			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
8-27-77	10-9-77 Name of Producing Formation	3790 Top Oil/Gas Pay	3740 '		
Elevations (DF, RKB, RT, GR, etc	'/		1 ' '		
6873 GL	Pictured Cliffs	3612	3651 Depth Casing Shoe		
Perforations			3790		
3612-3654	TURING CASING AN	D CEMENTING RECORD	3190		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
12 1/4	8 5/8	274	200		
7.7/8	T	3790	1055		
1.110	****				
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	after recovery of total volume of load	oil and must be equal to or exceed top allow-		
OIL WELL	able for this de	epth or be for full 24 hours;			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	s lift, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	2 19Th.		
		Water - Bbls.	Gas Nor A Com.		
Actual Prod. During Test	Cil-Bbls.	174161-2316.	CT CT. 3		
		1	de the CT CO 3		
			OIL DIS		
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensar		
2076 Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
	854	854	.75		
Back pressure			VATION COMMISSION		
I. CERTIFICATE OF COMPLIA	ANCE	OIL CONSER	VATION COMMISSION		
	to the Old Companyation	APPROVED	, 19		
Commission have been complied	nd regulations of the Oil Conservation d with and that the information given	the information given II Amagina i said in the control of the cont			
above is true and complete to	the best of my knowledge and belief.	BY			
		TITLE SUPERVISOR	1402. 20		
ORIGINA	II Steen				
	ORIGINAL SIGNAL :		This form is to be filed in compliance with RULE 1104.		
	L O. Speer, Jr.		llowable for a newly drilled or deepened npenied by a tabulation of the deviation		
·	(Signature)		cordance with RULE 111.		
Area Super	rintendent	All sections of this form	must be filled out completely for allow-		
	(Title)	able on new and recompleted	wells.		
October	25, 1977	Fill out only Sections I	, II, III, and VI for changes of owner, porter, or other such change of condition.		
	(Date)	11			

Form 3.50-5 (November 1983) (Formerly 9-331)	UNITED ST DEPARTMENT OF T	HE INTERIO	SUBMIT IN TRIPLICATES (Other Instructions of re-	Budget Bureau No. 1004-0135 Expires August 31, 1985 5. LEASE DESIGNATION AND SHEIAL NO.
	BUREAU OF LAND M	ANAGEMENT		Jicarilla Aapche 102 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUN	IDRY NOTICES AND	REPORTS O	N WELLS	O. IF INDIAN, ALLOTTEE OR TRIBE NAME
(Do not use this	form for proposals to drill or to Use "APPLICATION FOR PERM	deepen or plug bac	ck to a different reservoir.	tianuitla: Amaaba
ī.	USE APPLICATION TOWN I DATE			Jicarilla Apache 7. UNIT AGREEMENT NAME
OIL GAS	[]			
2. NAME OF OPERATOR	LX OTHER			8. FARM OR LEASE NAME
				licarilla Anache 102
3. ADDRESS OF OPERATOR	uction Company			Jicarilla Apache 102 9. WHILL NO.
		NII 071104	FIVED	26
4. LOCATION OF WELL (1	Drive Farmington, teport location clearly and in acco	rdance with any St		10. FIELD AND POOL, OR WILDCAT
See also space 17 bel At surface	1490' <del>FWL</del> x 183!	5' FWL R	FEB 12: 1985  FEB 12: 1985  FEB 12: 1985  MANAGEMENT  MANAGEMENT	Topacito Pict. Cliffs 11. ABC., T., R., M., OR REK. AND SURVEY OR ARMA SE/NW Sec. 10, T26N, R4V
14. PERMIT NO.	15. ELEVATIONS	(Show whether P)	To all etc.)	12. COUNTY OR PARISH 13. STATE
•		ام - دوما	CB	Rio Arriba NM
		00/3	()	I S
16.	Check Appropriate Box	To Indicate Na	ture of Notice, Report, or Ot	her Data
	NOTICE OF INTENTION TO:	1	SUBSEQUE	NT EMPORT OF:
TEST WATER SHUT-O	PCLL OR ALTER-CA	BING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLET	re	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*		SHOOTING OR ACIDIZING	ABANDONMENT <sup>®</sup>
REPAIR WELL	X CHANGE PLANS		(Other)	
(Other)			(Note: Report results of Completion or Recognite	of multiple completion on Well tion Report and Log form.)
the attached	d procedure.			
			<b>L</b> () FEB	2 0 1925 DM. 1917.
			Di	51. 3
18. I hereby certify that	the foregoine of Bay and correct	Λ cl m	inistrative Superviso	r 2/6/85
SIGNED	C. Shaw	TITLE Adm	ministrative Supervisor	DATE
(This space for Feder	al or State office use)			ADDDOVED
	***************************************			MERKUVED
APPROVED BYCONDITIONS OF AP	PROVAL, IF ANY:	TITLE		FEB 1 4 1986
	*Sc	e Instructions of	n Reverse Side	FOR MILLENBACH

\*See Instructions on Reverse Side

NMOCO

AREA MANAGER

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.